

IN UNITED STATES		MAGISTRATE	DISTRICT	<input type="checkbox"/> APPEALS COURT or	<input type="checkbox"/> OTHER PANEL (Specify below)
IN THE CASE					
USA	V.S.	<u>MOTT</u>		<div style="border: 1px solid black; padding: 2px;">LOCATION NUMBER</div> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>	
		<div style="border: 1px solid black; padding: 2px;">FOR</div> <div style="border: 1px solid black; padding: 2px;">AT</div>			
PERSON REPRESENTED (Show your full name)  <div style="border: 1px solid black; padding: 5px; font-size: 1.2em;">LORRAINE MOTT</div>				<div style="border: 1px solid black; padding: 2px;">             1 <input checked="" type="checkbox"/> Defendant--Adult              2 Defendant - Juvenile              3 Appellant              4 Probation Violator              5 Parole Violator              6 <input type="checkbox"/> Habeas Petitioner              7 <input type="checkbox"/> 2255 Petitioner              8 <input type="checkbox"/> Material Witness              9 <input type="checkbox"/> Other           </div>	
CHARGE/OFFENSE (describe if applicable & check <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor)				<div style="border: 1px solid black; padding: 2px;">DOCKET NUMBERS</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Magistrate</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">District Court</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Court of Appeals</div>	

EMPLOYMENT	Are you now <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed			
	Name and address of employer: _____			
	IF YES, how much do you earn per month? \$ _____		IF NO, give month and year of last employment _____	
			How much did you earn per month? \$ _____	
ASSETS	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	IF YES, how much does your Spouse earn per month? \$ _____		If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	RECEIVED SOURCES			
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____			
	CASH Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____			
	PROPERTY Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT		VALUE	DESCRIPTION
<div style="display: flex; justify-content: space-between;"> <div>           MARITAL STATUS  <input checked="" type="checkbox"/> SINGLE  <input type="checkbox"/> MARRIED  <input type="checkbox"/> WIDOWED  <input type="checkbox"/> SEPARATED  <input type="checkbox"/> DIVORCED         </div> <div>           Total No. of Dependents _____            List persons you actually support and your relationship to them _____            _____            _____         </div> </div>				
OBLIGATIONS & DEBTS	<div style="display: flex; justify-content: space-between;"> <div>           DEBTS &amp; MONTHLY BILLS  <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small> </div> <div>           APARTMENT OR HOME: <u>176 per month</u>  <u>Car</u>  <u>Electric</u>  <u>Phone</u> </div> <div>           Creditors: <u>Landlord</u>  <u>Car</u>  <u>Electric</u>  <u>Phone</u> </div> <div>           Total Debt \$ _____            Monthly Paymt. \$ _____         </div> </div>			

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)X Ms. Lorraine Mott

<b>FINANCIAL AFFIDAVIT</b>	
IN THE CASE	IN UNITED STATES    MAGISTRATE    DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)
USA    v.s. <u>Sunny Mohamed</u>	FOR _____ AT _____
PERSON REPRESENTED (Show your full name) <u>Sunny Mohamed Mohamed</u>	1 <input checked="" type="checkbox"/> Defendant—Adult 2 Defendant - Juvenile 3 Appellant 4 Probation Violator 5 Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other
CHARGE/OFFENSE (describe if applicable & check <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor)	LOCATION NUMBER _____ DOCKET NUMBERS Magistrate _____ District Court _____ Court of Appeals _____

<b>EMPLOYMENT</b>	Are you now	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Am Self-Employed	Name and address of employer: <u>Gama Taxi, PO Box 60, Ks1, Indale</u>
	IF YES, how much do you earn per month? \$	<u>3000-3500</u>	IF NO, give month and year of last employment
	If married is your Spouse employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$
	IF YES, how much does your Spouse earn per month? \$		
<b>ASSETS</b>	<b>OTHER INCOME</b>	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No RECEIVED    SOURCES	
		IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES	
	<b>CASH</b>	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    IF YES, state total amount \$ <u>1500.00</u>	
	<b>PROPERTY</b>	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE VALUE AND DESCRIBE IT	
	VALUE <u>Garage</u> 450-452 2nd St. Tallahassee <u>Gama Taxi</u> 140,000 <u>Gama's Taxi</u> 260,000	DESCRIPTION <u>my share of this media is 1/2</u>	
<b>OBLIGATIONS &amp; DEBTS</b>	<b>MARITAL STATUS</b>	Total No. of Dependents	List persons you actually support and your relationship to them
	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR <input type="checkbox"/> DIVORCED		<u>Gama Mohamed (son)</u>
	<b>DEBTS &amp; MONTHLY BILLS</b> <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>	Creditors	Total Debt    Monthly Paymt.
	<u>Shawn St. (rent &amp; utilities)</u> <u>Gama Taxi media</u> <u>Sunny's Taxi</u>	\$ 0 \$ 140,000 \$ 0	\$ 550.00 \$ 2100.00 \$ 0

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

7/20/2004SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)Sunny Mohamed